

Montana Medicaid - Fee Schedule School-Based Health Services

Definitions:

Modifier – When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.

For example:

26 = professional component

TC = technical component

Description – Procedure code short description. You must refer to the appropriate official CPT-4, HCPCS or CDT-4 coding manual for complete definitions in order to assure correct coding.

Effective – This is the first date of service for which the listed fee is applicable.

Method – Source of fee determination

Fee Sched: Medicaid fee; not determined using RBRVS payment schedule

Medicare: Medicare-prevailing fee.

By Report (BR): Equals 51% of billed charges

Anes Value: Number of anesthesia base value units. This is added to the 15 min. time increment units and multiplied by the anesthesia conversion factor of \$26.25.

RBRVS: Based on Medicare Relative Value Units (RVU's) x Montana Medicaid conversion factor x policy adjuster

Fees School-based providers receive 90% of the calculated RBRVS fee, this amount is the fee shown on this fee schedule.

Effective May 15, 2003, this fee will be adjusted to reimburse the services at the federal matching assistance percentage (FMAP) rate.

PA – Prior Authorization

Y: Prior authorization is required

Space - this indicator does not apply to this code

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Proc	Mod	Description	Effective	Method	FMAP Fees
H0036		COMM PSY FACE-FACE PER 15MIN	7/1/2003	FEE SCHED	\$16.71
T1000		PRIVATE DUTY NURSING	7/1/2003	FEE SCHED	\$5.25
T1019		PERSONAL CARE SER PER 15 MIN	7/1/2003	FEE SCHED	\$2.36
90801		PSY DX INTERVIEW	7/1/2003	RBRVS	\$87.78
90802		INTAC PSY DX INTERVIEW	7/1/2003	RBRVS	\$93.45
90804		PSYTX OFFICE 20-30 MIN	7/1/2003	RBRVS	\$37.92
90806		PSYTX OFF 45-50 MIN	7/1/2003	RBRVS	\$56.87
90808		PSYTX OFFICE 75-80 MIN	7/1/2003	RBRVS	\$84.85
90846		FAMILY PSYTX W/O PATIENT	7/1/2003	RBRVS	\$55.18
90847		FAMILY PSYTX W/PATIENT	7/1/2003	RBRVS	\$67.30
90853		GROUP PSYCHOTHERAPY	7/1/2003	RBRVS	\$18.65
92506		SPEECH/HEARING EVALUATION	7/1/2003	RBRVS	\$48.44
92507		SPEECH/HEARING THERAPY	7/1/2003	RBRVS	\$39.94
92508		SPEECH/HEARING THERAPY	7/1/2003	RBRVS	\$32.47
96100		PSYCHOLOGICAL TESTING	7/1/2003	RBRVS	\$34.98
97001		PT EVALUATION	7/1/2003	RBRVS	\$38.87
97002		PT RE-EVALUATION	7/1/2003	RBRVS	\$20.86
97003		OT EVALUATION	7/1/2003	RBRVS	\$41.29
97004		OT RE-EVALUATION	7/1/2003	RBRVS	\$25.13
97110		THERAPEUTIC EXERCISES	7/1/2003	RBRVS	\$14.80
97112		NEUROMUSCULAR REEDUCATION	7/1/2003	RBRVS	\$15.21
97113		AQUATIC THERAPY/EXERCISES	7/1/2003	RBRVS	\$15.72
97116		GAIT TRAINING THERAPY	7/1/2003	RBRVS	\$13.08
97124		MASSAGE THERAPY	7/1/2003	RBRVS	\$11.72
97140		MANUAL THERAPY	7/1/2003	RBRVS	\$14.06
97150		GROUP THERAPEUTIC PROCEDURES	7/1/2003	RBRVS	\$9.69
97504		ORTHOTIC TRAINING	7/1/2003	RBRVS	\$14.98
97530		THERAPEUTIC ACTIVITIES	7/1/2003	RBRVS	\$15.00
97532		COGNITIVE SKILLS DEVELOPMENT	7/1/2003	RBRVS	\$12.78
97533		SENSORY INTEGRATION	7/1/2003	RBRVS	\$13.55
97535		SELF CARE MNGMENT TRAINING	7/1/2003	RBRVS	\$16.12
97542		WHEELCHAIR MNGMENT TRAINING	7/1/2003	RBRVS	\$14.67
97703		PROSTHETIC CHECKOUT	7/1/2003	RBRVS	\$11.53